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CONFIRMATION NO. 1749

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|--|---|-------------------------------|---|--------------------------------------|--------------------------------------|
| SERIAL NUMBER 10/822,241 | FILING OR 371(c) DATE 04/09/2004 RULE | CLASS 223 | GROUP ART UNIT 3765 | ATTORNEY DOCKET NO. 0153-1 | |
| APPLICANTS Sylvester Russo, Howell, NJ; ✓ NED | | | | | |
| ** CONTINUING DATA ***** none NED | | | | | |
| ** FOREIGN APPLICATIONS ***** none NED | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 06/23/2004 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>State Farm</u> <u>NED</u> Examiner's Signature Initials | | STATE OR COUNTRY NJ | SHEETS DRAWING 1 ✓ | TOTAL CLAIMS 4 X NED | INDEPENDENT CLAIMS 2 X NED |
| ADDRESS 25901 | | | | | |
| TITLE Smart hanger system | | | | | |
| FILING FEE RECEIVED 485 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |